

JC20 REC'D OFFICE 27 OCT 2005

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD AND APPARATUS FOR COOLING EXTRUDED PLASTIC FOIL HOSES
Attorney Docket Number::	9007-1015
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: HUNGARY
Status:: Full Capacity
Given Name:: ANTAL
Middle Name::
Family Name:: PELCZ
Name Suffix::
City of Residence:: BUDAÖRS
State or Province of
Residence::
Country of Residence:: HUNGARY
Street of Mailing SEREGÉLY 3
Address::
City of Mailing Address:: BUDAÖRS
State or Province of Mailing Address::
Country of Mailing Address:: HUNGARY
Postal or Zip Code of Mailing Address:: 2040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: HUNGARY
Status:: Full Capacity
Given Name:: TAMÁS
Middle Name::
Family Name:: ILLÉS
Name Suffix::
City of Residence:: LAKHEGY
State or Province of
Residence::
Country of Residence:: HUNGARY
Street of Mailing RÁKÓCZI 1
Address::
City of Mailing Address:: LAKHEGY

State or Province of Mailing Address::
Country of Mailing Address:: HUNGARY
Postal or Zip Code of Mailing Address:: 8913

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/HU2004/000045	4/30/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
HUNGARY	P 031174	4/30/03	Yes

Assignment Information

Assignee Name::
Street of Mailing
Address::
City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::